

Docket No. 59643.00582

SQUIRE, SANDERS &amp; DEMPSEY L.L.P.

**Declaration For U.S. Patent Application**

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled  
(Insert Title) MEASUREMENTS IN COMMUNICATIONS SYSTEMS

the specification of which is attached hereto unless the following box is checked:

☒ was filed on September 10, 2002 As PCT International Application  
Number PCT/FI2002/000728 and was amended on \_\_\_\_\_  
And/or was filed on \_\_\_\_\_ As United States Application  
Number \_\_\_\_\_ and was amended on \_\_\_\_\_

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s), as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56.

I hereby claim foreign priority benefits under 35 U.S.C. §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States, listed below and have also identified below any foreign application for patent or inventor's certificate or PCT International Application having a filing date before that of the application(s) for which priority is claimed:

(List prior foreign applications)	(Number) _____	(Country) _____	(Day/Month/Year Filed) _____	Priority Claimed <input type="checkbox"/> Yes <input type="checkbox"/> No
	(Number) _____	(Country) _____	(Day/Month/Year Filed) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No
	(Number) _____	(Country) _____	(Day/Month/Year Filed) _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under 35 U.S.C. §119(c) of any United States provisional application(s) listed below.

(Application Number) _____	(Filing Date) _____
(Application Number) _____	(Filing Date) _____

☐ See attached list for additional prior foreign or provisional applications.

I hereby claim the benefit under 35 U.S.C. §120 of any United States application(s) or §365(c) of any PCT International application(s) designating the United States of America listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior application(s) (U.S. or PCT) in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

(List prior U.S. Applications or PCT International applications designating the U.S.)	(Application Serial No.) _____	(Filing Date) _____	(Status) (patented, pending, abandoned) _____
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And I hereby appoint the firm of Squire, Sanders & Dempsey, Customer Number 32294 including as principal attorneys: Douglas H. Goldhush, Reg. No. 33,125; Kevin F. Turner, Reg. No. 43,437; William F. Nixon, Reg. No. 44,262; Arlene P. Neal, Reg. No. 43,828; Majid S. AlBassam, Reg. No. 54,749; David E. Brown, Reg. No. 51,091; and Alicia M. Choi, Reg. No. 46,621.

Please direct all communications to the following address:

Customer No. 32294  
SQUIRE, SANDERS & DEMPSEY L.L.P.  
8000 Towers Crescent Drive, 14<sup>th</sup> Floor  
Tysons Corner, Virginia 22182-2700  
Telephone No. (703) 720-7800; Facsimile No. (703) 720-7802

The undersigned hereby authorizes the U.S. attorneys named herein to accept and follow instructions from the undersigned's assignee, if any, and/or, if the undersigned is not a resident of the United States, the undersigned's domestic attorney, patent attorney or patent agent, as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorneys named herein will be so notified by the undersigned.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

1-00 Full name of sole or first inventor Anni TÖLLI  
 Inventor's signature [Signature] S. 2. 2005  
 Date  
 Residence Oulu, Finland FIX  
 Citizenship Finnish  
 Post Office Address Kahvelitie 8 as 1, FIN-90500 Oulu, Finland

Full name of second inventor Uwe SCHWARZ  
 Inventor's signature \_\_\_\_\_  
 Date  
 Residence Veikkola, Finland  
 Citizenship German  
 Post Office Address Lehtikuusentie 16, FIN-02880 Veikkola, Finland

Full name of third inventor Petteri HAKALIN  
 Inventor's signature \_\_\_\_\_  
 Date  
 Residence Málaga, Spain  
 Citizenship Finnish  
 Post Office Address C/ Salamanca 104, Villa Vili, La Capellania, Benalmádena pueblo, E-29639 Málaga, Spain

Full name of fourth inventor Heikki HIRVONEN  
 Inventor's signature \_\_\_\_\_  
 Date  
 Residence Tampere, Finland  
 Citizenship Finnish  
 Post Office Address Urpukatu 2, FIN-33820 Tampere, Finland

Full name of fifth inventor \_\_\_\_\_  
 Inventor's signature \_\_\_\_\_  
 Date  
 Residence \_\_\_\_\_  
 Citizenship \_\_\_\_\_  
 Post Office Address \_\_\_\_\_

Full name of sixth inventor \_\_\_\_\_  
 Inventor's signature \_\_\_\_\_  
 Date  
 Residence \_\_\_\_\_  
 Citizenship \_\_\_\_\_  
 Post Office Address \_\_\_\_\_

Full name of seventh inventor \_\_\_\_\_  
 Inventor's signature \_\_\_\_\_  
 Date  
 Residence \_\_\_\_\_  
 Citizenship \_\_\_\_\_  
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Full name of sole or first inventor Antti TÖLLI

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence Oulu, Finland

Citizenship Finnish

Post Office Address Paalikatu 14 A 110, FIN-90520 Oulu, Finland

200 Full name of second inventor Uwe SCHWARZ

Inventor's signature Uwe Schwarz 02.02.2005  
Date

Residence Veikkola, Finland FIX

Citizenship German

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Full name of third inventor Petteri HAKALIN

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence Málaga, Spain

Citizenship Finnish

Post Office Address C/ Salamanca 104, Villa Vili, La Capellania, Benalmádena pueblo, E-29639 Málaga, Spain

400 Full name of fourth inventor Heikki HIRVONEN

Inventor's signature Heikki Hirvonen 7.2.2005  
Date

Residence Tampere, Finland FIX

Citizenship Finnish

Post Office Address Urpukatu 2, FIN-33820 Tampere, Finland

Full name of fifth inventor \_\_\_\_\_

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of sixth inventor \_\_\_\_\_

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of seventh inventor \_\_\_\_\_

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

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Priority Claimed

☐ Yes ☐ No

☐ Yes ☐ No

☐ Yes ☐ No

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Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence Veikkola, Finland

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Full name of third inventor Petteri HAKALIN

Inventor's signature [Signature] 4/21/2005

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Citizenship Finnish 24

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Full name of fourth inventor Heikki HIRVONEN

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence Tampere, Finland

Citizenship Finnish

Post Office Address Urpukatu 2, FIN-33820 Tampere, Finland

Full name of fifth inventor \_\_\_\_\_

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of sixth inventor \_\_\_\_\_

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

Residence \_\_\_\_\_

Citizenship \_\_\_\_\_

Post Office Address \_\_\_\_\_

Full name of seventh inventor \_\_\_\_\_

Inventor's signature \_\_\_\_\_ Date \_\_\_\_\_

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Post Office Address \_\_\_\_\_

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